Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

42390 P11655

		l (Colur	mn 2)	_	SMALL ENTITY TYPE OF			OTHER THAN SMALL ENTITY				
TOTAL CLAIMS			24				ſ	RATE	FEE		RATE	FEE.
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			<i>Q</i>		· 4			X\$ 9=	72	OR	X\$18=	
IND	EPENDENT CL	minus 3 =		* 2			X40=	160	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	£3 ₁₂
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL	742	OR	TOTAL	
CLAIMS AS AMENDED - PART II										· !	OTHER	
	era uza erzuen.	(Column 1)	HESSEL STATE OF THE STATE OF TH	(Colui		(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-,	RATE	ADDI- TIONAL FEE
NDN	Total		Minus	**		=		X\$ 9=		OR	X\$18=	海藥验
AME	Independent	dependent * Minus *** RST PRESENTATION OF MULTIPLE DEPENDE			T CLAIM	=		X40=		OR	X80=	
TAMOS TRECEIVATION OF WOLFIT LE DET ENDENT CLAIM								+135=	. #	OR	+270=	
								TOTAL ADDIT. FEE	AND FRANCE	OR	TOTAL ADDIT: FEE	
		(Column 1)			NODIT. FEE			2 3 7 2 %	沙漠 特别			
AMENDMENT B		CLAIMS REMAINING AFTER		HIGH NUM PREVI	mn 2) HEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
DME	Total	AMENDMENT	Minus	**	FOR	=	╽┟	X\$ 9=	FEE	OR	X\$18=	FEE
MEN	Independent	Taring or	Minus	***		=	 	X40=			X80=	
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7,00-	
And the second of the second o								+135=		OR	+270=	
Angerstag Brown on the Control of								TOTAL ADDIT. FEE		OR	TOTAL ADDIȚ. FEE	4-3-4-1
100 m		-			•	7						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	, je	RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=	- 5.7	OR	X\$18=	
AME	Independent	pendent + Minus +** ST PRESENTATION OF MULTIPLE DEPENDEN		***	T CLAIM	=		X40=		OR	X80=	
										OR	+270=	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Pa ber Previously Pa					er foui	nd in the app	ropriate box	(in co	lumn 1.	